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T E L E C O P Y C O V E R S H E E T

Date: June 4, 2003

TO: Name: Patent Examiner Carla J. Myers

Address: U.S. Patent and Trademark Office

Group Unit: 1634

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No. of Pages: 10 (including cover sheet)

Re: U.S.S.N. 09/928,102

COMMENTS:

See attached.

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Sent By _____ Date Sent June 4, 2003 Time Sent _____

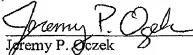
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Perls *et al.* DOCKET NO.: BIT-001 (1538/47)
SERIAL NO.: 09/928,102 GROUP NO.: 1634
FILING DATE: August 10, 2001 EXAMINER: Carla J. Myers
TITLE: GENETIC LOCI INDICATIVE OF PROPENSITY FOR LONGEVITY
AND METHODS FOR IDENTIFYING PROPENSITY FOR AGE-
RELATED DISEASES

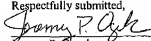
CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence, and any documents referred to as attached hereto, are being transmitted to the United States Patent and Trademark Office, Facsimile No. (703) 746-5042 on this 4th day of June, 2003.


Jeremy P. Oczek

Attached hereto are:

- (1) Petition for Extension of Time Under 37 CFR 1.136(a) (1 page);
- (2) Copy of Petition for Extension of Time Under 37 CFR 1.136(a) (1 page); and
- (3) Amendment After Final Office Action (6 pages).

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Attorney Docket Number BIT-001 (1538/47)																					
In re Application of Perls <i>et al.</i>																							
Application Serial No. 09/928,102																							
Filed: August 10, 2001																							
Group Art Unit: 1634		Examiner: Carla J. Myers																					
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above entitled application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired)</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;"><input type="checkbox"/></td> <td style="width: 70%;">One month (37 CFR 1.17(a)(1), Fee Code 1251/2251)</td> <td style="width: 10%; text-align: right;">\$</td> <td style="width: 10%;"></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Two months (37 CFR 1.17(a)(2), Fee Code 1251/2252)</td> <td style="text-align: right;">\$</td> <td></td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Three months (37 CFR 1.17(a)(3), Fee Code 1251/2253)</td> <td style="text-align: right;">\$</td> <td style="text-align: right;">923.00</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Four months (37 CFR 1.17(a)(4), Fee Code 1251/2254)</td> <td style="text-align: right;">\$</td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td>Five months (37 CFR 1.17(a)(5), Fee Code 1251/2255)</td> <td style="text-align: right;">\$</td> <td></td> </tr> </table> <p><input checked="" type="checkbox"/> Applicants claim small entity status under 37 CFR 1.27, therefore the fee amount shown above is reduced by one-half, and the resulting fee is: <u>\$465.00.</u></p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge the required fee to Deposit Account No. 20-0531. Enclosed is a duplicate of this sheet.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account No. 20-0531.</p> <p><input type="checkbox"/> Return receipt postcard enclosed.</p> <p>I am the <input type="checkbox"/> assignee of record of the entire interest. <input type="checkbox"/> applicant. <input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____</p>				<input type="checkbox"/>	One month (37 CFR 1.17(a)(1), Fee Code 1251/2251)	\$		<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2), Fee Code 1251/2252)	\$		<input checked="" type="checkbox"/>	Three months (37 CFR 1.17(a)(3), Fee Code 1251/2253)	\$	923.00	<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4), Fee Code 1251/2254)	\$		<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5), Fee Code 1251/2255)	\$	
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CORRESPONDENCE ADDRESS		SIGNATURE BLOCK																					
Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibault, LLP High Street Tower 125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100		Respectfully submitted,  Jeremy P. Ozdek Attorney for Applicants Testa, Hurwitz & Thibault, LLP High Street Tower 125 High Street Boston, MA 02110 Date: June 4, 2003 Reg. No. 50,794 Tel. No.: (617) 248-7100 Fax No.: (617) 248-7100																					

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